# MENTAL HEALTH LOCAL ADVISORY COUNCIL HANDBOOK

Revised-May 2007

"Community to Community.

Making a difference across Montana for people with mental illness"

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## Section I - Orientation:

## 1. **Acronyms**

LAC- Local Advisory Council
SAA- Service Area Authority
KMA- Kids Management Authority
SOCs- System of Care (kid system)

MHOAC- Mental Health Oversight Advisory Council

HRD- Health Resource Division (State agency overseeing children's system)

AMDD- Addictive & Mental Disorders Division (State agency overseeing adult

system)

#### 2. Introduction

## What is a Local Advisory Council?

A local advisory council is a coalition of community members interested in assessing, planning and strengthening public mental health services in their community.

#### What does it mean to my community?

Those impacted by the effects of mental illness can ensure that their voices, suggestions and ideas can make a difference in how services are planned and provided.

#### Who can participate?

All those concerned and interested in how persons with mental illnesses are treated and helped to achieve independence and health.

#### Specific objectives of a LAC may include the following:

- Identify gaps in services.
- Assess the effectiveness of local mental health services and suggest ways services may be more effective.
- Recommend potential additions to services within the community.
- Analyze and discuss problems with service providers, advocacy groups, public
  officials and the general public.
- Facilitate accurate and timely communications between the local community and other governing entities.
- Serve as a catalyst and facilitator in solving local mental health service problems.
- Organize and coordinate needed services in the community.
- Educate the local community on mental health issues.

If you or someone you know has been impacted by depression, anxiety, or other serious mental health problems, your mental health Local Advisory Council needs your voice and skills/talents.

#### 3. Why are Local Advisory Councils (LACs) important?

The need for and value of Local Advisory Councils was identified by the 1999 Legislature 53.21.702(1)(b). LACs are one of the elements of a system of public mental health care that emphasizes the importance of local participation. This participation is vital in planning for effective, individualized mental health services in each community.

The purpose of a LAC is to serve as the foundation for assessing, planning and strengthening public mental health services in the community and to provide input and recommendations to other governing entities.

LACs are not intended to duplicate or replace service delivery agencies but rather to coordinate and collaborate with other councils, boards and advisory groups involved with the planning, delivery and evaluation of mental health services.

Participation by those who provide services directly or in a support capacity, is important to comprehensive local planning and recommendations. Community hospitals, mental health and chemical dependency counselors, county commissioners, local law enforcement, community employers, human service agencies, and school personnel are invited to become part of LACs.

## 4. Requirements of Local Advisory Councils.

- Schedule regular meetings of community stakeholders.
- Submit regularly scheduled meeting minutes to AMDD dladd@mt.gov
- Work in <u>collaboration</u> with AMDD, HRD, SAA's and MHOAC for assessing, planning and strengthening public mental health services in your community.
- LAC reporting form: (There is a copy of the form at the back of this Handbook)
  - This form can be found online at the DPHHS web site, or link directly to the form by using the link below:
     http://www.dphhs.mt.gov/aboutus/divisions/addictivementaldisorders/localadvisory/reportform.doc

#### • Roberts Rules of Order:

 These are generally accepted rules of procedure for public meetings that could support more effective process and outcomes for LAC's.

# 5. <u>How do the SAAs and LACs fit into the DPHHS organizational</u> structure?

AMDD is mandated by 53.21.1001 to collaborate with the three SAA's in the design, development and delivery of mental health services in their region. The SAA's are the only organization that AMDD is mandated to collaborate with.

AMDD representatives (Regional Planner and Community Program Officers) attend LAC meetings, SAA meetings and SAA Summit meetings across the State. This representation is to ensure that there are consistent lines of communication and strong alignment with goals and objectives between SAAs, LACs, MHOAC, AMDD and HRD. These staff are the eyes, ears, arms and voice of AMDD.

## Section II - Service Area Authorities:

## 1. What is the Service Area Authorities (SAA's) Purpose?

This purpose Statement below was adopted by all three SAA's

## **PURPOSE STATEMENT**

The purpose of an SAA is to collaborate with the Department of Public Health and Human Services (DPHHS) to assist in the management of public mental health care. A SAA's primary purpose is to ensure that consumers of public mental health care, their families, and other interested community stakeholders may actively collaborate with the State of Montana in defining, developing, managing, and monitoring the systems of public mental health care. The objective is to ensure that consumers' needs and preferences are at the center of the services provided.

#### The SAA is a consumer and family driven process based upon two principles:

Services and treatments must be consumer and family centered, geared to give individual consumers real and meaningful choices about treatment options and providers - not simply oriented to the requirements of bureaucracies. The SAA process is developed to give consumers and their families a much greater voice in managing the funding for their services, treatments, and supports. This design gives consumers a vested economic interest in using resources wisely to obtain and sustain recovery. 2) Care must focus on increasing individual consumers' ability to successfully cope with life's challenges, on facilitating recovery, meeting basic needs and on building resilience.

Overall, the SAA process will ensure a consumer-centered, recovery oriented mental health system in Montana that provides individual consumers served in the public mental health system a greater voice in the system that serves them.

# 2. What are the Regions and where are other Local Advisory Councils situated?



- ❖ Above you can see the three Service Area Authority Regions (Western, Central and Eastern).
- Red Dots indicate active Local Advisory Councils across the State.
- You will find a <u>Statewide LAC Directory</u> at the back of this booklet

#### **RESOURCES**

For more information about how to contact a Local Advisory Council near you, contact Carol Davidson at cdavidson@mt.gov or at (406) 444-3964.

For more information on LAC Policies, Guidelines and Reports, visit the Addictive and Mental Disorders webpage at: <a href="https://www.dphhs.mt.gov/amdd/">www.dphhs.mt.gov/amdd/</a>
Under More Information in the left-hand column,
<a href="https://www.dphhs.mt.gov/amdd/">Click on</a>

→ "Local Advisory Council and Service Area Authority Information"

## Section III - Policy:

## 1. <u>Local Advisory Council Policy:</u>

The Mental Health Oversight Advisory Council created the LAC policy in 2002. This policy is not reflected in State statute. The MHOAC may choose to revise this policy in collaboration with AMDD, HRD and the SAA's.

## **Policy on Local Advisory Councils**

## Statement of Purpose

This policy is to specify the creation, purpose, structure and general operations of Local Advisory Councils (LACs) and to clarify the relationship of such councils to the Mental Health Oversight Advisory Council (MHOAC), the Department of Public Health and Human Services (DPHHS) and Service Area Authorities (SAA).

## 1.0 Legislative Framework & LAC Creation

- 1.1 In 1999, the Montana legislature, through SB 534, acknowledged the value of LACs and directed the MHOAC and DPHHS to develop a provision for LACs to report to and meet on a regular basis with the MHOAC (MCA 53-21-702).
- 1.2 SB 534 also validated the importance of local participation in delivering mental health services by clarifying that LACs are to be included as one of the elements of a system of public mental health care.
- 1.3 LACs are designed to complement, not duplicate or replace, other groups, councils and boards (e.g. provider boards of directors, advocacy groups, service area authority boards, other advisory councils) involved with the planning, delivery and evaluation of mental health services.

#### 2.0 Purpose of a Local Advisory Council

- 2.1 The basic purpose of an LAC is to assist, in a manner it determines to be most productive, in strengthening public mental health services in the local community and to provide input and recommendations to MHOAC, DPHHS and the SAA serving the community.
- 2.2 Specific objectives of an LAC may include some or all of the following:
  - 2.2.1 Examine gaps in child and adult services.
  - 2.2.2 Identify potential additions to services within the community.
  - 2.2.3 Analyze and discuss local problems with local service providers, advocacy groups, public officials and the general public.
  - 2.2.4 Facilitate accurate and timely communications between the local community and MHOAC, DPHHS and the regional SAA.
  - 2.2.5 Assess the effectiveness of local mental health services and suggest ways of making services more effective.
  - 2.2.6 Serve as a catalyst and facilitator in solving local mental health service problems.
  - 2.2.7 Organize and coordinate needed services in the community.
  - 2.2.8 Educate the local community on mental health issues.

#### 3.0 Structure and Creation of a Local Advisory Council

- 3.1 Each LAC must seek active participation by primary and secondary consumers (family members), advocates, and other interested parties, including providers. It is recommended that each LAC include significant representation of primary and secondary consumers.
- 3.2 LACs should seek the support of government officials, including but not limited to city and county commissioners, judges, county sheriffs, and so on
- 3.3 LACs should submit a letter of intent to the MHOAC to be recognized as a local advisory council. The letter should define the structure of the local advisory council and how consumer and family member involvement will be encouraged.
- 3.4 The MHOAC will formally recognize local advisory councils by reviewing the proposed LACs letter of intent in light of the following criteria:
  - 3.4.1 Composition of the LAC, as described in section 3.1.
  - 3.4.2 Support of local government, as defined in section 3.2.
  - 3.4.3 The existence of other LACs in the community, and the need or value of an additional LAC.
- 3.5 The MHOAC will distribute a letter of recognition to new LACs and local government officials.
- 3.6 The MHOAC shall review the status of the each LAC by June 30 of each even-numbered fiscal year.

#### 4.0 General Operations of a Local Advisory Council

- 4.1 The DPHHS, in cooperation with the MHOAC, will provide technical assistance to LACs, including but not limited to:
  - 4.1.1 Getting organized and creating the LAC.
  - 4.1.2 Providing leadership training and education.
  - 4.1.3 Identifying potential sources of revenue for postage, printing, travel and meeting arrangements.
- 4.2 Each LAC may designate a Leadership Team, including one primary consumer to coordinate the activities of the LAC, including but not limited to preparing agendas, arranging the time and place of meetings, facilitating meetings, preparing documents, and so on.
- 4.3 Each LAC shall also designate a Liaison who will be the primary contact for the local advisory council and who will submit a summary update of LAC activities to DPHHS each month.
- 4.4 LACs should meet on a regular basis.
- 4.5 LACs may submit meeting summaries or minutes, issues and concerns, and proposals or recommendations to the MHOAC. LACs are encouraged to explain the rationale for specific proposals or recommendations.
- 4.6 LACs may periodically submit information for publication by DPHHS.

# 5.0 Relationship of LACs to the Mental Health Oversight & Advisory Council (MHOAC)

- 5.1 LACs shall request the MHOAC convene at least one meeting each year to listen to and exchange ideas with LACs. This meeting may be either face-to-face or via telecommunications.
- 5.2 The LACs shall request the MHOAC to formally acknowledge receipt of proposals and recommendations from LACs, to give such proposals and recommendations due consideration, to give timely feedback to the LAC, and, to forward appropriate proposals and recommendations to the DPHHS and the legislature.
- 5.3. LACs will request and encourage MHOAC members to participate in LAC meetings in MHOAC member communities and to work together to facilitate communication between LAC's and the MHOAC.
- 5.4 LACs will request the MHOAC and its subcommittees to ensure that LACs are represented on the MHOAC.
- 5.5 LACs designated liaison shall request MHOAC meeting summaries and shall distribute and inform other LAC members.

#### 6.0 Relationship of LAC's to Service Area Authorities

- 6.1 Each LAC will appoint one member to participate as a member of the governing structure of the SAA serving the community.
- 6.2 LACs may submit meeting summaries or minutes, issues and concerns, and proposals or recommendations to the SAA. LACs are encouraged to explain the rationale for specific proposals or recommendations.
- 6.3 LACs will make proposals and recommendations to the SAA and request that the SAA take action in the proposal itself or, if more appropriate, forward the proposal to DPHHS and/or other relevant government agencies.
- 6.4 LACs primary focus will be to advise the SAA on program issues affecting the local community.

### 2. Overview- Mental Health Oversight Advisory Council:

## **Mental Health Oversight Advisory Council**

Working Mission, Vision, and Principles To Guide Mental Health System Change

#### Mission:

Partners in Planning for a recovery-based mental health system throughout Montana.

#### Vision:

We envision a collaborative public mental health system that promotes independence, self-determination and recovery through individual, family, advocate and community participation. With effective treatment, knowledge and support, Montanan's with mental disorders will achieve education, meaningful work, satisfying family relationships, friendships and participation in the community.

#### **Principles:**

We see these principles as a natural outgrowth of our MHOAC mission and vision statement. They provide more definition around what we mean by "self-determination and recovery". The Council's expectation is that the Addictive and Mental Disorders Division and Health Resources Division, will be attentive to these principles and calibrate their decisions about current system work, budget priorities and the development of the regionalized system in light of these working principles.

The Council realizes not every action will conform, but the idea is to raise awareness of the fundamental shift that is necessary to move toward a recovery-based system.

- 1. The focus is on recovery, wellness/health and return to life and work.
- 2. More <u>equity</u>, <u>access and satisfaction</u> with the system that recognizes the <u>distinct</u> <u>systems of care</u> necessary to meet the needs of children and their families and adults and their support systems.

- 3. <u>Stigma is reduced</u> summed up in humorous way on a bumper sticker: "You're just jealous because the voices only talk to me ..." and another way of saying: "the mentally ill are us".
- 4. Mentally ill peoples' lives are improved and they live in their communities with support systems. The <u>emphasis is on keeping youth and adults in their community settings</u> rather than in institutional placements.
- 5. The system is flexible, based on the individual needs of consumers.
- 6. <u>Community education and awareness is paramount.</u> People also understand that mental illness is a brain disorder and does not define the person.
- 7. <u>First responders respond appropriately</u> diverting the mentally ill from the criminal justice system.
- 8. Montana sets the standard for a regional system. <u>We identify and overcome structural</u> barriers to access <u>and community based care.</u>
- 9. We have more and more <u>effective collaboration and interagency agreements.</u> We have cooperation, trust and respect on everything from the small issues to big issues.
- 10. We acknowledge the high incidence of co-occurring disorders and address them.
- 11. Native American issues are brought forward and addressed both for life on Indian Reservations and for Indians who live in other Montana places.

## Section IV - Attachments:

Name of LAC:		Date of Last Meeting:
Month of Report:		Date of Next Meeting:
LAC Liaison Name:		
Ph:		nail:
LAC accomplishments since las	st report:	
<b>Emerging issues identified:</b>		
Recommendations made by LA	.C:	
Other:		

## **Local Advisory Council Directory**

	<b>v</b>	nen Birectory
<u>County(s)</u>	Western Service Area Authority LAC's wsaamt.org	Contact information
Beaverhead Co	Second Friday of each month @	Pam Mussard - Chair
meets in Dillon	noon.	1260 S. Atlantic # 100
	In the Court House.	Dillon MT 59725
		Phone: 683-4440
		pmussard@buttechc.com
Flathead Co	Second Wednesday of each	Thomas Bartlett - Chair
meets in Kalispell	month @ 1:00 pm.	33 Hathaway Lane
1	In the Summit Building.	Kalispell, MT 59901
	Boyd Roth- Contact	Phone: 885-3865
	PO Box 1254	Bartlett@montanasky.net
	Kalispell, MT 59901	
	Phone: 752-6003	
	boydroth@cyberport.net	
Lake Co. –	First Wednesday of each month	Royalee Bishop- Chair
Ronan & Polson	@ 2 pm, at Court House	
AND		Polson, MT 59864
Sanders Co	Juanita Triplett, Program	Phone: (406) 726-0260
meets in Polson	Director of WMMHC in Sanders	e-mail contact
	County	royaleebishop@yahoo.com
Lincoln Co. –	First Thursday of month, in Rm.	Alyce Anderson- Chair
meets in Libby	117 @ Lincoln County Campus	519 East 4th Street
	Building, 225 Commerce Way @	Libby, MT 59923
	<b>2:30 p.m.</b> Phone (406) 293-8746	Phone: 293-5370
	WMMHC	A_alyce@hotmail.com
Missoula Co.–	3 <sup>rd</sup> Monday of each month @ 2	Brook Jaqueth - Chair
meets in	pm	1437 S 1st St W
Missoula	At 1315 Wyoming St. River	Apt A Missoula, MT 59801
	House ADT	Phone: (406) 728-8093
		sbushell@summitilc.org
Ravalli Co	Second Monday of month @	Charles Baker- Chair
Meets in	noon, Marcus Daly Hospital	Riverfront Counseling and Support Center,
Hamilton	,	P.O. Box 1300
		Hamilton, MT 59840
		Phone: 381-0559
		csbaker59840@earthlink.net
Silver Bow Co	Second Thursday of each month	Michelle Lewis- Chair
meets in Butte	@ noon	106 W Broadway
	In the WMMHC at 106 W.	Butte, MT 59701
	Broadway.	Phone: 723-5489
	•	jmartz@wmmhc.org
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County(s)	Central Service Area Authority LAC's csaamt.org	<b>Contact information</b>
Cascade Co	First Tuesday of each month @	Joe Moll -Chair
Meets in Great	1 pm.	416 8 <sup>th</sup> Ave S. # 2
Falls	In the MH Center.	Great Falls, MT 59406
	Joan-Nell MacFadden-	Phone: 453-4582
	2620 4 <sup>th</sup> Ave S	joemoll@sofast.net
	Great Falls, MT 59405	
	Phone: 452-4185	
	jnmacfadden@aol.com	
Gallatin Co. –	Second Monday of each month	Jacob Wagner-Chair
meets in	@ noon.	311 West Main St. Rm 306
Bozeman	In the Court House.	Bozeman, MT 59715-4576
		Phone: (406) 582-3000
	Dorothy Bradley- Co-Chair	commission@co.gallatin.mt.us
	615 16 <sup>th</sup> Ave	
	Bozeman, MT 59715	
	Phone: 582-2091	
	dobradley@mt.gov	
Lewis & Clark	Fourth Thursday of each month	Dan Anderson- Chair
Co. –	@ 7 pm.	2475 Stuart
Meets in Helena	In the Golden Triangle building.	Helena, MT 59601
Tricous III IIciciia	in the Column Triangle Suntaing.	Phone: 449-6003
		dfanderson@bresnan.net
Park Co. –	4 <sup>th</sup> Thursday of each month @	Kris Denton- Contact
Meets in	3:30.	County Commissioners office
Livingston	In the City County Building.	414 East Callender
Zi vingston	in the city county bunding.	Livingston, MT 59047
	Dick Murphy-commissioner	Phone: 222-4106
	Dien Murphy commissioner	commissioners@parkcounty.org
Teton-Pondera	In the Teton Medical Center,	Lora Wier- Chair
Co. – meets in	Choteau.	Public Health Nurse
Choteau	Joe Dellwo Co. Comm	905 4 <sup>th</sup> Street NW
		Choteau, MT 59422
	Kathleen Nelson, secretary	Phone: 466-2562
	Phone: 406-466-3782	health@3rivers.net
	knelson@3rivers.net	
	<u> </u>	

County(s)	Eastern Service Area Authority LAC's esaamt.org	Contact information
Big Horn Co.– Meets in Hardin	2 <sup>nd</sup> or 3 <sup>rd</sup> Thursday of the month @ noon.	Bill Hodges - Chair
Meets in Hardin	In the Fountain Restaurant	809 N. Custer Hardin MT 29034
	Lee Ann Hiebert, Secretary	Phone: 665-8723
	lhiebert@scmrmhc.org	bhodges@co.bighorn.mt.us
Carbon Co	Bi-monthly, 2 <sup>nd</sup> or 3 <sup>rd</sup> Tuesdays	Nancy MHC secretary - Chair
Meets in	@ 11:30.	5 East 9 <sup>th</sup> Street
Red Lodge	In the Bridge Creek restaurant.	Red Lodge, MT 59068
		406-446- 2500
Custer Co	Third Thursday on month @	Antonia Klein- Chair
Meets in	4:30 at DEAP conference room	Phone: (406) 853-4421
Miles City	Einst Catumday of and month	aklein@mt.gov
Daniels Co meets in Scobey	First Saturday of each month Daniels Memorial Health Care	Esther Kramer-Chair Phone: 487-2881
meets in Scobey	Center	ekramer@nemontel.net
	Center	<u>extance encontented</u>
Dawson Co	2 <sup>nd</sup> Wednesday of each month at	Pete Bruno- Chair
meets in Glendive	noon	
	Glendive Public Library	Glendive, MT 59330
		Phone: 377-7515
	Bobbie Becker 377-4062	peteb@midrivers.com
T. G	beckerb@midrivers.com	
Fergus Co.	Fourth Monday of alternate	Marie Jackson- Chair
Wheatland Co. Petroleum Co.	month @ noon, at the MHC	Lewistown, MT 59457 evamarie200@hotmail.com
Judith Basin Co.	Suzanne Hopkins- NAMI	350 1818 or 538 8062
meets in	suzanneh@lewistown.net	330 1010 01 330 0002
Lewistown		Carl Silstad- Co. Comm. 538-5119
	Rosemary Baquet, MH Secretary	commissioners@co.fergus.mt.us
	Phone: 538-7483	
14 11 11 2	n.baquet@bresnan.net	
Musselshell &	Fourth Monday @ NOON	Lavonne Rook- Chair
Golden Co's- Meets in	alternating month. Alternating locations: Next	26 Main Roundup, MT 59072
Round-Up	Generation Grille	Phone: 323-2101
Itouna Op	Cindi Goffena, MH Secretary	lrook@state.mt.us
	*please email info to:	
	cgoffena@scmrchc.org	
Richland Co. –	Third Thursday of month @	Kim Youngquist –Chair
Meets in Sidney	10:00 a.m.	Richland Health Network
	Community Services bldg	124 S. Central Ave
G 6 11 4	MI WI C A	Sidney, MT 59270
Conf rm direct	Mike Weber, Co Attorney	Phone: 433-6946

line 406-433-6924	201 West Main	kimhealth@richland.org
	Sidney, MT 59207	
	406-433-2505	Marie Logan, MHC
	FAX 406-433-3731 (clerks office)	e-mail via
	rcatty@richland.org	brendapropp@gmail.com
		Subject line ATTN Marie
Stillwater Co	Quarterly- meetings	Cindy Wittman, SCMHC- Chair
meets in	Quarterly- incetings	Box 238
Columbus	MHC Conference Room	Columbus, MT 59019
Columbus	Pike Ave.	Phone: 322-4514
	The Tive.	cwittman@scmrmhc.org
Sheridan Co	Liza Dyerdahl, MHC Therapist-	Darcy Nordhagen
Plentywood	Change agent	darcy@nemontel.net
Sweet Grass Co.	Bi-monthly, 2 <sup>nd</sup> Tuesday of the	Karen Herman- Chair
Meets in	month @ noon.	Big Timber, MT 59011
Big Timber	In the old Hospital	Phone: 932-4716
Dig Timber	515 Hooper Street	T_k_herman@hotmail.com
	313 Hooper Street	1 K nerman e notman.com
		Lloyd Berg, Co Comm
		932-5152
Yellowstone Co. –	First Thursday of each month	Dee Holley –chair
meets in Billings	@ noon, at the Community	406-896-8805
meets in binings	Crisis Center	pholley@mcn.net
		phone; c memics
	Dr. Donald Harr Co Chair	Rachel Movius, Secretary
	3010 Wendimere Lane	Mental Health Center
	Billings, MT 59102	P.O. Box 219
	Phone: 248-8091	Billings, MT 59103
	Ssurely1@worldnet.att.net	406-252-5658
	Bill Kennedy	
	Yellowstone County Comm.	
	PO Box 35000	
	Billings, MT 59107-5000	
	256-2701 (W) 245-6051 (H)	
	bkennedy@co.yellowstone.mt.us	
Valley Co. –	Meets at noon on the 3rd	Colleen Forrester-Chair
meets in Glasgow	Tuesday of the month at FMDH	NCILS
	Board Room.	P.O. Box 229
	David Pippin-Co comm. on	Glasgow, MT 59230
	LAC. 228-6219	Phone: 228-2075
	dpippin@co.valley.mt.us	ncils2@nemontel.net
	*ALL DATES AND TIMES	
	ARE SUBJECT TO CHANGE.	
	THE DODGE TO CHANGE.	

#### **To update contact information:**

#### Daniel N. Ladd

Regional Planner Mental Health Services Bureau Addictive and Mental Disorders Division, DPHHS Phone (406) 444-9344 Cell (406) 431-6175

email: <u>dladd@mt.gov</u>

or

## Carol L. Davidson

Administrative Assistant Addictive and Mental Disorders Division, DPHHS

Phone: (406) 444-7209 email: <a href="mailto:cdavidson@mt.gov">cdavidson@mt.gov</a>

## Regional Community Program Officers information:

Western Region	#5	Mary Jane Fox	471-1074
North Central Regi	on #2	Jane Wilson	788-8167
South Central Regi	on #4	Dennis Cox	498-7358
South Eastern Regi	ion #3	Cheryl Nystrom	670-6910
Eastern Region	#1	Antonia Klein	853-4421